

**2014 Annual Report
Kentucky Board of Medical Licensure
Preston P. Nunnelley**

Over the past few years, physicians have seen tremendous changes in the delivery of healthcare in the Commonwealth. Ranging from the adoption of electronic medical records and the implementation of healthcare reform to the advancements of telemedicine, physicians have seen their worlds change in a very short time. In addition, physicians have also been called upon to assist with Kentucky's prescription drug abuse crisis by implementing the standards set out in the Board's prescribing controlled substance regulations. The Board has noted that Kentucky physicians have responded to this call and have embraced these advancements that are having a positive impact on the lives of patients.

It is in this rapidly changing environment that the Kentucky Board of Medical Licensure operates and contributes to public safety of the Commonwealth by ensuring that medical and osteopathic physicians abide by acceptable standards of professional conduct. Like most licensing boards throughout the nation, the mission statement of the Board is to protect the public through the licensing of qualified medical and osteopathic physicians and the initiation of appropriate disciplinary action when violations of the Medical Practice Act occur. Along with physicians, the Board is also responsible for public safety by overseeing other health care professions such as physician assistants, athletic trainers, surgical assistants and acupuncturists.

As in previous years, Kentucky's fight against prescription drug abuse continued to dominate many of the activities of the Board in 2014. With the adoption and implementation of the Board's regulation on prescribing controlled substances, 201 KAR 9:260, and other HB 1 regulations in 2013, the Board set crucial standards for physicians to follow for the long-term prescribing of controlled substances for pain. As a result, the Board has seen physicians adopt these standards, and reports have shown that prescribing for some of the most known abused medications has gone down. Utilization of the state's prescription monitoring program, KASPER, has gone up immensely and has been a key component to a physician's ability to

identify possible patients that may be abusing controlled substances or engaging in illegal activity. The Board also continues to see an increase in its investigative activities involving allegations of inappropriate prescribing of controlled substances. The Board considers these types of allegations to be very serious and continues to take appropriate disciplinary action when prescribing violations are found. Collaborative efforts with various state and federal law enforcement agencies are ongoing in an effort to identify potential prescribing problems involving physicians. In addition, the Board continues to work very closely with the Cabinet for Health and Family Services, the Office of Inspector General and their Drug Enforcement and Professional Practices Branch, as well as with the Governor's KASPER Advisory Council on numerous investigative matters.

On a similar note, the Board has seen a growing trend of physicians having issues with prescribing Suboxone and buprenorphine products, which are used to treat opioid addiction. A Board Opinion on this topic was issued several years ago to provide guidance to physicians on this issue; however, problems with the medication have intensified due to its illegal street value and high demand. Law enforcement and other state agencies have noted concerns over problems with the diversion of these medications and reported their concerns to the Board. As a result, the Board has directed its staff to begin drafting a regulation that would set out the standards for prescribing Suboxone and buprenorphine products. Work has already begun on this issue, and meetings with interested stakeholders have been held in order to utilize their expertise and earn their support on this matter.

Another issue that focuses on the rapid changes in the practice of medicine in Kentucky is the increased utilization of telemedicine services. The Board noted the interest in this topic and adopted an Opinion Regarding the Use of Technologies in the Practice of Medicine, which is available on the Board's website. The Opinion, which does not have the force of law, was adopted as a result of the rapidly growing field of telemedicine and in an effort to educate the Board's licensees as to the appropriate use of telemedicine technologies in the practice of medicine. In summary, the Opinion outlines that the Board expects physicians to:

- Have a medical or osteopathic license in Kentucky;
- Place the welfare of the patients first;
- Conform to acceptable and prevailing medical practices;
- Adhere to recognized ethical codes governing the medical profession;
- Properly supervise non-physician clinicians; and
- Protect patient confidentially.

The Board would like to offer its appreciation to the Federation of State Medical Boards for working on this issue and providing model language for state medical boards to consider.

Working with allied health professionals is another area where physicians have seen changes over the past year. In the 2014 legislative session of the Kentucky General Assembly, legislators passed SB 7, which modified the requirements for collaborative prescribing agreements for non-scheduled medication between advanced practice registered nurses (APRN's) and physicians. This legislation also created the Collaborative Prescribing Agreement Joint Advisory Committee made up of three appointees from the Board and three appointees from the Kentucky Board of Nursing. As a result, the Board appointed the following three physicians to the Committee: Nancy Swikert, M.D., Ron Walldridge, Jr., M.D. and Renee Girdler, M.D. This Committee will serve as an advisory capacity to both Boards on issues related to collaborative agreements for non-scheduled medication.

Legislators also passed legislation, SB 4, which addresses physician assistants and the countersigning of medical records. This legislation amends KRS 311.856 by deleting the requirement that supervising physicians sign all records of service rendered by a physician assistant in a timely manner and replaced it with language that a supervising physician shall review and countersign a sufficient number of overall medical notes written by the physician assistant, but at a minimum, a supervising physician shall review and countersign at least ten

percent of these overall medical notes every thirty days. The legislation also makes note that a countersignature is not required prior to orders being executed.

Another piece of legislation that was passed during the 2014 legislative session and involved the Board was SB 29, which changed the practice of acupuncture in Kentucky from certified to licensed. The law is now in effect, and the Board has implemented the changes and new appropriate licensure documentation has been issued to all acupuncturists licensed by the Board. The Board would like to remind all citizens of the Commonwealth that verification of an acupuncturist's license is available on our website.

Continuing medical education requirements for physicians was another area that legislators addressed during the 2014 legislative session. HB 157, which had broad support, was passed and requires the Board to include in its continuing medical education requirements training on the recognition and prevention of pediatric abusive head trauma for pediatricians, radiologists, family practitioners, and emergency medicine and urgent care physicians. The legislation requires that physicians practicing in the above mentioned specialties must demonstrate completion of a one-time course of at least one hour of training on this subject approved by the Board prior to December 31, 2017. Future licensed physicians in these specialties must complete the course within five years of licensure. As a result of this action, the Board is currently working on amending 201 KAR 9:310 to enact this change.

As part of the Board's continual outreach effort, the Board's Newsletter continues to be published on a quarterly basis and is sent to all physicians with an active Kentucky license. In the age of high speed and wireless communication, the Newsletter remains one of the Board's most efficient tools to notify physicians of important information. The Board uses this valuable resource as an educational conduit to physicians and calls to their attention any changes in statutes, regulations or practice guidelines dealing with the practice of medicine. For instance, the Board utilized the Newsletter to notify physicians about the release of the new drug Zohydro and cautioned physicians about the risks of the medication. The Newsletter also lists

all disciplinary actions recently taken by the Board. As a service to all Kentucky hospitals, a listing of recent disciplinary actions is emailed to them on a monthly basis.

One of the most important resources that the Board provides the medical community and consumers continues to be the Board's website, www.kbml.ky.gov. The site provides valuable information about the Board, policy statements and guidelines, a direct link to the state Medical Practice Act, administrative regulations and other information for physicians, physician assistants, athletic trainers, surgical assistants and acupuncturists. We have received a great deal of positive feedback on the amount of information on the website about substance abuse and treatment along with guidance on drug screening, patient education and drug disposal. Consumers can also go on the site and find out how to file a grievance and gain access to a profile of all physicians, physician assistants, athletic trainers and acupuncturists who hold an active license or certification, as well as any Board action taken within the last ten years. Many consumers have stated that this service has aided them in their ability to make informed and reasonable choices when choosing their health care professional. Since the inception of the Board's website in 2002, it has continually been praised by medical professionals, consumers and the media. The Board has also made changes that optimized the website for mobile users.

Continuing medical education continues to be a main focus of the Board as we strive to ensure that all licensed Kentucky physicians obtain 60 hours of continuing medical education every three years. Thirty (30) of these CME hours must be in Category 1, while the remaining 30 hours can be in Category 2 or may consist of non-supervised personal training activities. The Board is currently in the last year of our three-year cycle. Physicians are randomly audited to track compliance, and the Board automatically audits physicians that have grievances filed against them. If a physician fails to meet this CME requirement, he or she receives a fine and is granted a six-month extension to complete the requirement. Physicians that do not obtain the required CME within this period are suspended until they meet the requirements. Recent reminders have been placed in the Board's Newsletter notifying physicians of the end of the

cycle and with specific attention being placed on the requirements for physicians authorized to prescribe controlled substances in Kentucky to have training on the use of KASPER, pain management and addiction disorders, or a combination of two or more of those subjects.

In addition to the Board's role of licensing and investigating grievances against physicians and allied health professionals, the Board remains a strong supporter of the Kentucky Physicians Health Foundation. The Board contracts and provides funding to the Foundation in order to facilitate the prevention, identification, intervention and rehabilitation of Kentucky physicians who have, or who are at risk for developing, disorders that are associated with functional impairment or who are suffering from chemical dependency, mental health issues or behavioral problems. This valuable program has saved hundreds of medical careers over the years while ensuring that the public is protected through their monitoring efforts and collaboration with the Board. The Board would like to offer its appreciation to the Foundation's Medical Director, Greg Jones, M.D., for his contributions in providing physicians and other practitioners with education regarding substance abuse and the identification of addiction.

The Board also welcomed two new members this year with the appointments of Heidi Koenig, M.D. and Patrick Hughes, Esq. by Governor Beshear. Dr. Koenig is an anesthesiologist practicing in Louisville and filled the vacancy left by Mickey Anderson, M.D., whose term expired. Mr. Hughes is a practicing attorney from Crestview Hills and he filled the vacancy left by Justice William Graves, whose term also expired. The Board would like to thank Dr. Anderson and Justice Graves for their years of service to the Board and to the citizens of the Commonwealth.

In addition to welcoming two new Board members, the Board's long-time General Counsel, C. Lloyd Vest, announced his retirement from the Board after 18 years of service. Mr. Vest made this announcement so that he could take the position as the Executive Director of the Arizona Medical Board. The Board would also like to thank Mr. Vest for his many years of

service to the Board and the citizens of the Commonwealth. Due to Mr. Vest's move, the Board appointed Ms. Leanne Diakov as its new General Counsel. Ms. Diakov formerly served as the Board's Assistant General Counsel for the past five years. The Board also welcomed a new Assistant General Counsel in the hiring of Ms. Sara Farmer as its new Assistant General Counsel. Ms. Farmer formerly served as a prosecutor with the Jefferson County Commonwealth Attorney's Office.

The Board continues to be active in carrying out its statutory responsibilities. Attached is an administrative report reflecting the number of meetings held by the Board and its various Committees, the number of licenses issued and renewed and a summary of disciplinary action taken during the year. We have also included statistical data on physicians with active Kentucky medical and osteopathic licenses noting their medical status, the number of physicians practicing in each county, the various specialties practiced in the state and the types and sources of grievances filed against physicians licensed by the Board.

This is just a brief summary of some of the many activities the Board has been involved with during the year. In conclusion, I would like to thank the members of the Board and its staff for their dedication and hard work throughout the year. Serving on the Board is a true honor and one that I know that each member of the Board holds in the highest regard. We take great pride in the Board's ability to serve the citizens of the Commonwealth and will continue to work to protect the public and improve the quality of health care in Kentucky.

**Kentucky Board of Medical Licensure
Administrative Report
Fiscal Year 2014**

Meetings Held:	FY2014
Board of Medical Licensure	4
Inquiry/Hearing Panels	14
Physician Assistant Advisory Committee	4
State Council on Athletic Trainers	4
Surgical Assistant Advisory Committee	4
Acupuncture Advisory Committee	4

Licensure Activity for M.D.'s and D.O.'s

Renewals and Applications:

Registered In State	*11,010
Registered Out of State	5,535
Applications Provided For Initial Licensure	1,286

New Licenses Issued:

Medical Licenses	989
Osteopathic Licenses	114
Temporary Permits	666
Residency Training Licenses	250
Institutional Practice Limited Licenses	19
Fellowship Training Limited Licenses	12
Faculty Licenses	1

Licensure/Certification Activities for Allied Health Professionals

Physician Assistants

Active	1,083
New	99

Athletic Trainers

Active	598
New	99

Surgical Assistants

Active	205
New	14

Acupuncturists

Active	75
New	8

***Includes 560 retired physicians for FY2014.**

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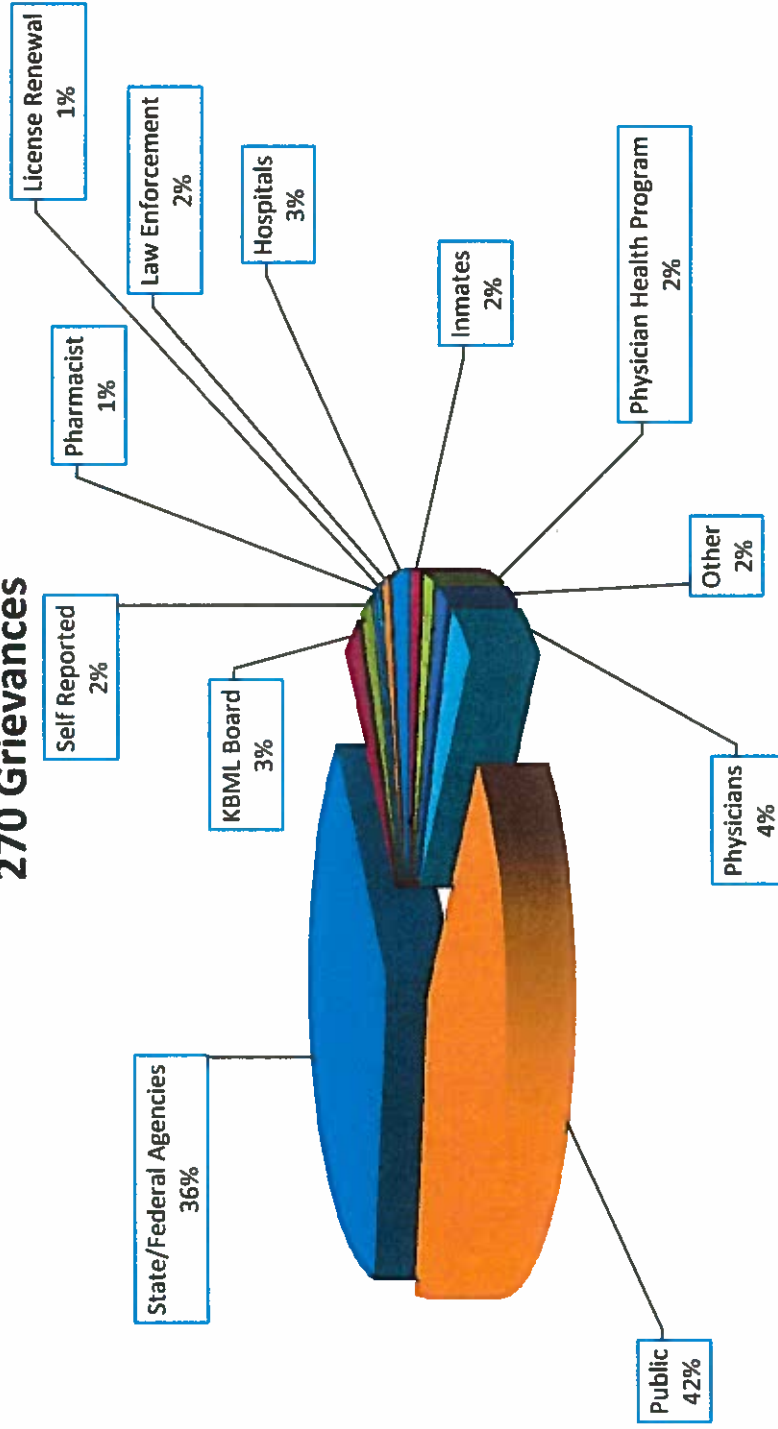
Disposition of Grievances and Disciplinary Actions Taken:

Grievances Reviewed	270
Total Cases to Panel	366
Cases Investigated to Panel	181
Investigations Pending	160
Malpractice Cases Reviewed	47
Disciplinary Proceedings Authorized	129

Disciplinary Action Taken

Complaints Issued	31
Emergency Orders of Suspension	15
Emergency Orders of Restriction	5
Orders of Probation	0
Orders of Revocation	7
Orders of Suspension	2
Agreed Orders	13
Agreed Orders of Indefinite Restriction	20
Agreed Orders of Surrender	13
Agreed Orders of Probation	3
Agreed Orders of Revocation	0
Agreed Orders of Suspension	0
Agreed Orders of Fine	10
Agreed Orders of Retirement	4
Interim Agreed Orders	13
Orders Amended	33
Letters of Agreement	12
Letters of Admonishment	10
Letters of Concern	39

Source of Grievance July 1, 2013 - June 30, 2014 270 Grievances



Type of Grievance

July 1, 2013 - June 30, 2014

270 Grievances

